

Countering Family Violence

Nourishing a Stronger
Army Family

HOT TOPICS

SUMMER 2000

CURRENT ISSUES FOR ARMY LEADERS

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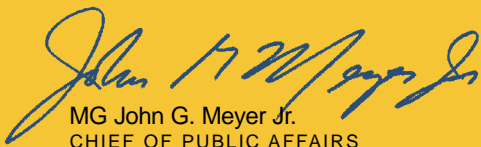
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THIS issue of **Hot Topics** is designed to help leaders anticipate and prevent the violence that occurs in thousands of Army homes each year. It outlines every leader's responsibility to report known or suspected cases of family violence; describes how to recognize trouble and stress in soldiers' lives; and explains how you can encourage soldiers to seek the personalized, one-on-one help of intervention services provided by the Army Family Advocacy Program.

As leaders who care about the welfare of our units, we must be advocates of family well-being, whether by enforcing people's right to be free from harm or by linking soldiers with services that can help their families work together through stress and change. It is crucial that we connect soldiers with these services at the first signs of stress—before a problem evolves into a violent crisis.

Leaders who commit themselves to improving the quality of life of soldiers and their families reap gratifying rewards. Not only are their soldiers empowered by higher morale, but unit readiness and retention rates also increase. We hope this issue helps you to foster positive, healthy relationships within Army families, which will surely produce more cohesive and mission-capable units.

As with every issue of **Hot Topics**, we welcome your comments. Please let us know how we can better help you teach and lead America's soldiers.


MG John G. Meyer Jr.
CHIEF OF PUBLIC AFFAIRS



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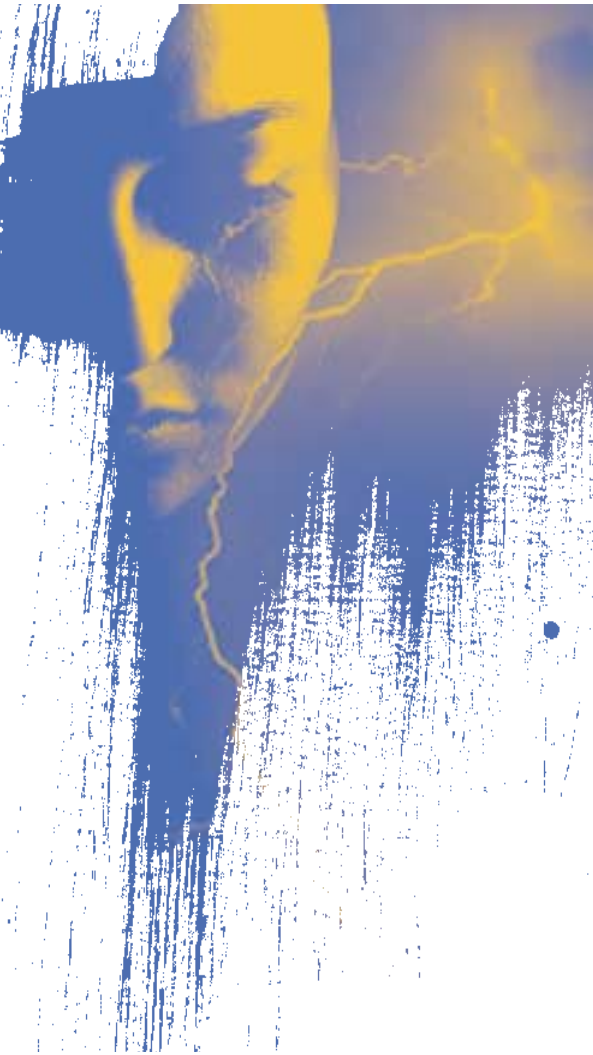
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Countering Family Violence

Nourishing a Stronger Army Family



Soldiers and their families are the Army's most valuable asset,

but the military lifestyle they lead often involves great hardship and change. Since **stress** is a leading cause of family violence, leaders must be alert to soldiers' behavior and ensure that they have the tools to develop and maintain a healthy balance of coping and communication skills within their families.

This issue of *Hot Topics* outlines every leader's responsibility to prevent, report and intervene in violence within Army families. By investing care and concern into your soldiers' and families' lives, you foster the growth and morale of the entire unit.



Family Violence Can Be a Career-stopper

DEPARTMENT of Army policy dated May 21, 1999, prohibits any soldier who has been convicted in court of a misdemeanor crime of domestic violence from having access to or possessing firearms or ammunition. Since this policy affects a soldier's capacity to handle or fire a weapon, it means that soldiers cannot undergo weapons qualifications or be deployed. Such soldiers are barred from re-enlistment.

This policy stems from the Lautenberg Amendment to the Gun Control Act of 1968, which became U.S. law in September 1996. This law makes it a felony for any person who has been convicted of a misdemeanor crime of domestic violence to ship, transport, possess or receive ammunition or firearms. The policy applies to all military personnel, Department of Defense civilians and reserve-component personnel. Nonjudicial punishment, summary courts-martial and deferred prosecutions are not included in the definition of "conviction."

*Any soldier who
has been convicted of a crime of
domestic violence is prohibited from having
access to firearms or ammunition.*

Violence Statistics

IN 1999 there were 7,673 substantiated allegations of family violence within Army ranks. Women and children suffered the most injuries, and researchers emphasize that these numbers include only cases that were reported and cannot be inclusive of violence that occurred unnoticed or was ignored. Substantiated abuse reports illustrate that more than half of both spouse and child abuse is mild, while severe abuse makes up less than 10 percent of spouse abuse and 12 percent of child abuse.

The total number of spouse-abuse reports was an alarming 8,286, with 4,810 of those reports being substantiated by evidence. Studies reveal that spouse abuse is most frequent among young couples who have not yet developed joint coping and communication skills.

The age of spouse-abuse offenders was:

18- to 21-year-olds	20 %
22- to 26-year-olds	40%
27- to 31-year-olds	23%
32- to 36-year-olds	11%
37- to 41-year-olds	4 %
42-year-olds and above	1%

Child-abuse reports were somewhat lower than those of spouse abuse at 6,623, with 2,863 of those cases being substantiated. Studies reveal that child abuse is committed most often by young adults who lack parenting skills.

The age of child-abuse offenders was:

18- to 21-year-olds	9 %
22- to 26-year-olds	33%
27- to 31-year-olds	28%
32- to 36-year-olds	16 %
37- to 41-year-olds	8 %
42-year-olds and above	2%

women and children suffer the injuries

Preventing Violence by Promoting Healthy Relationships

SHARON LLEWELLYN



WHILE the vast majority of Army families enjoy relationships of mutual love and respect, thousands of Army spouses and children become victims of violence each year as a result of stress and unsettled problems. The Army expects leaders to react without hesitation when they become aware of known or suspected abuse. Without exception, every leader is

responsible for preventing and reporting family violence. They are sensitized to pick up information and usually know if problems could become violent," he said. "They know if a soldier is not reporting for duty or is having trouble with alcohol. They also know if a soldier is having financial difficulty or is not paying bills."

The most beneficial contribution leaders can make to their units is a

referral to the Family Advocacy Program is not punitive

responsible for preventing and reporting family violence.

Prevention entails everything from teaching soldiers how to recognize when problems are on the edge of turning violent to guiding soldiers toward the right resources when they need a hand coping with problems and communicating with loved ones. To stop family violence, leaders must be in tune with their soldiers' attitudes, aware of the troubles they face and willing to foster a trusting environment in which soldiers feel comfortable with the

sincere expression of concern for soldiers' welfare. Leaders have the inherent power to promote balance within families, and encourage them to develop their strengths and seek help for weaknesses. When leaders show that they, too, have some insight into life's challenges and losses, soldiers feel more comfortable about opening up and accepting the command's support.

Leaders should recognize that a referral to the Family Advocacy Program is not punitive and they should also not be afraid to inter-

let soldiers know that you're trying to help them vene, said Sharon

risk of revealing their vulnerabilities.

Rex Becker, manager of the Army's Family Advocacy Program, explained that leaders are in an opportune position to support and initiate changes in a family's well-being.

"Leaders are often the first to become aware if a soldier is having

Llewellyn, the Army's Family Programs manager.

"Leaders should not wait until there are serious problems to get involved," she said. "It's sad when a very serious case of abuse arises but the family and soldier were never referred."

Becker explained that individuals

REX BECKER



who commit abuse need treatment for the initial problems that led to the abuse. If the initial problems are ignored, whether they're situational or family related, they are likely to persist.

"That's why when a leader recognizes that a soldier is having trouble, he or she should immediately intervene and say, 'I am referring you so you can get assistance.' It's important to let soldiers know that you're trying to help them," he said.

Leaders can directly affect the success rate of soldiers and families in treatment by staying involved. "They know if the soldier is required to go to an anger-management class and can make sure the soldier has the opportunity to attend," Becker added. "The leader can be supportive by asking the soldier how treatment is going."

Preventing family violence can also be as simple as talking with soldiers about the value of the family structure, and highlighting the positive aspects of being a spouse and raising children. Regardless of what is said in conversations, leaders send a direct message about how to treat others on a daily basis.

"Leaders can set the example of what proper behavior is. They show that in how they treat their subordinate soldiers, how they treat fellow soldiers, and how they treat families," Becker said. "For example, leaders can teach male soldiers to look at a woman as someone who is special by conveying that a victim of abuse is somebody's sister, somebody's wife, somebody's daughter. Leaders can also teach women to look at men as somebody's brother, son or husband."

WHAT IS FAMILY VIOLENCE?

FAMILY violence is a person's way of declaring power and control over another person through abuse. Injury can be physical, emotional, sexual or neglectful, and is usually targeted toward either a spouse or a child. Spouse and child abuse are often interrelated and may occur together or at different times within the family.

Evidence shows that family violence can be linked to several factors:

- a history of abuse within the family;
- problems within the marriage;
- an increase in individual or family stress;
- specific personality traits associated with the abuse;
- social isolation or a limited support network; and
- increased financial pressures.

Physical abuse may include grabbing, pushing, slapping, choking, punching and kicking. Life-threatening physical abuse might involve assaults with

knives, firearms or other weapons. The visible signs of physical abuse are the same in spouses and children, and range from minor cuts and bruises to fractures and burns.

Emotional abuse may not cause visible injury, but affects can include low self-esteem; chronic fear or anxiety; conduct disorders; or other cognitive or mental impairment. Psychological or emotional violence is behavioral treatment that entails verbal threats, extreme control, intense jealousy and mental degradation. Property violence also constitutes emotional abuse if it is intended to intimidate and might include throwing food, breaking dishes and destroying a person's property or injuring one's pet.

Sexual abuse is forcing one to engage in any sexual activity through violence, intimidation or threat. Sexual abuse includes exploitation, rape, sodomy, molestation and incest.

Neglect is a person's failure to provide necessary care or assistance for someone who is incapable of self-care physically, emotionally or culturally.

Indicators of Abuse



BOTH spouse and child abuse occur at various levels of severity. Mild abuse involves limited physical injury with no medical treatment needed. Moderate abuse involves minor or major physical injury with short-term medical treatment. Severe abuse involves major physical injury or long-term medical treatment, inpatient care or moving the victims to an alternate environment for safety. These are some indicators of abuse:

MILD

Verbal threats;
Bruises, welts, scratches or abrasions that are confined to one area;
Hair pulling that does not remove hair.

MODERATE

Minor burns or blisters confined to a small area;
Bruises, welts, scratches or abrasions that are widespread;
Small cut requiring stitches;
Bite marks on any area;
Second-degree burns;
Sprains;
Mild concussions;
Broken teeth;
Hair pulling that results in hair removal.

SEVERE

Any injury during pregnancy;
Extensive cuts requiring stitches;
Head injuries;
Third-degree burns to any area of the body;
Minor burns to an extensive area of the body;
Injuries resulting in impairment to sight, hearing or mental abilities;
Burns or bruises to the genital area;
Extensive and multiple bruises in various states of healing, indicating a pattern of abuse;
Cuts, bruises or abrasions on face, neck or shoulders;
Minor burns on face or abdomen;
Any use of torture such as electric shock or burning with objects;
Preventing a person from breathing for a short period of time;
Choking or strangling;
Threats with a knife or gun;
Sexual abuse;
Administering any harmful substance.

The Violent Cycle

BEHAVIORS of victims and offenders show that family violence is usually a continuing, entrapping cycle. First, tension begins to build. Demands are increased, stress escalates and put-downs are frequent. Tension leads to an explosion, such as hitting, humiliating and controlling. After the blow-up, both the victim and offender lapse into a honeymoon phase during which the problems are denied, love is declared or promises are made. The victim finds new hope and believes the relationship will change. However, the issues that initially caused the violence were not addressed and still exist.

Army Family Advocacy Program The Leader's Prevention Tool

THE Army Family Advocacy Program helps soldiers and their families nurture healthy relationships by working with family and individual strengths. Since every relationship endures occasional periods of stress and change, FAP zeroes in on specific problem areas to help soldiers and their family members resolve their issues constructively and overcome difficulties.

FAP's first steps in preventing family violence begin with leaders. It offers a variety of tools that leaders can use in educating, preventing, identifying, assessing and treating family violence.

A leader's first introduction to the FAP should be within the first 45 days of assuming command, as outlined in Army Regulation 608-18. FAP trainers outline leaders' responsibility to prevent family violence and provide a link to community resources that can assist both the offenders and victims of family violence. Each commander and NCO should also receive a personal copy of the FAP's Desk

Guide, which charts the steps of preventing and handling cases of family violence within the unit. The guide also provides space for emergency-contact information.

Each installation has a FAP to which leaders may refer their soldiers and family members for the following services:

- ⊙ support groups for new, single-parent and dual-military families;
- ⊙ family and marriage-enhancement workshops;
- ⊙ parenting workshops;
- ⊙ individual, couple and family counseling;
- ⊙ classes in stress management, anger control and financial planning;
- ⊙ respite and foster care; and
- ⊙ resource library.

Prevention

A leader's responsibility



THE leader's responsibility in preventing family violence is an ongoing affair of education and support. Next to soldiers themselves, leaders are the primary team members for successful prevention because they specialize in assisting soldiers and families on a daily basis.

Commanders and leaders are in a perfect position to prevent family violence by simply keeping their eyes and ears focused on soldiers' behavior and suggesting the use of prevention tools provided by the Family Advocacy Program.

Leaders can build trust with their soldiers by fostering an open dialogue and openly acknowledging that everyone experiences trouble sometimes. Soldiers should also realize that stress decreases one's ability to make sound decisions.

The leader who looks out for the well-being of individual soldiers:

- Anticipates stressful events.
- Ensures soldiers attend an annual briefing by the Family Advocacy Program. Ensures soldiers know that violence can be a crime. Discusses Army standards and rules about domestic violence and outlines the consequences.
- Talks about prevention strategies. Stresses the value of problem-solving and conflict-resolution skills, respect, self-accountability, walking away when emotions are at a peak, and being in control of a situation.
- Encourages soldiers to be open about their concerns and problems at the first signs of stress. Is supportive and non-judgmental.
- Listens to what and how something is being said.
- Balances a leadership approach with a supportive response to a soldier's or family's explanation of their difficulties.
- Teaches soldiers that it is their personal obligation to take responsibility for their actions and seek help before a problem becomes a crisis.
- Is aware of the unit grapevine and alert to concerns and rumors.
- Refers soldiers to the FAP as appropriate so families have a productive, safe environment in which to work through their problems before violence erupts.

Reporting Family Violence

THE reporting requirement for child and spouse abuse states that every soldier, employee and member of the military community is obligated to report information about known and suspected cases of child and spouse abuse. Leaders must:

- Report suspicions of child and spouse abuse promptly to the 24-hour report point of contact, which is normally the local medical treatment facility emergency room or the military police.

- Prepare to provide all relevant information to investigation authorities by gathering situational details and asking specific questions, such as: Who? When? Where?

- Advise the chain of command of what's happening.

- Inform victims about support programs designed to meet their emotional, physical and financial needs.

- Work jointly with the command when called upon to carry out safety measures.

- Play an active role in the treatment process by communicating with the FAP multi-disciplinary team and ensuring soldiers are granted the time to attend counseling and classes outlined in the treatment plan.



Assessment and Treatment Planning

IMMEDIATELY upon receiving a report of family violence, the severity of the violence and the safety of the victim are assessed. The case is presented to the case review committee (CRC)—a multidisciplinary team generally chaired by the chief of social work—composed of social workers, physicians, chaplains, attorneys, military law-enforcement and investigative personnel, and alcohol and drug-abuse prevention specialists. Others may act as professional consultants on a case-by-case basis. The unit commander is asked to attend the CRC when a soldier's case is scheduled for presentation or review.

The CRC coordinates the medical, legal, law-enforcement and social-service clinical assessment of the abuse; recommends treatment for both the offender and the victim; and ensures that the safety plan for the protection of the victim is effective. Treatment plans vary depending on the level of abuse and who is involved, and are typically a blend of psycho-educational courses and counseling sessions that sharpen analysis and development skills. Depending on the extent of abuse and family members involved, counseling may have an individual, couple, family or collective focus.



help comes from—social workers, physicians, chaplains, attorneys, military law-enforcement and investigative personnel, and alcohol and drug-abuse prevention specialists

Safety Planning:

Keeping Victims Out of Harm's Way Before and During Treatment

IF safety planning is prescribed by the multidisciplinary team to ensure victims can escape an abusive environment, it will require the constant, proactive reinforcement of the offender's commander. This is crucial if treatment is to be successful. Depending on the severity of violence and potential for imminent danger, leaders may choose from:

- Separating the soldier from the family for a calming period.
- Restricting the soldier to the barracks.
- Assigning a responsible escort to the offender when visiting or retrieving personal belongings at the quarters.

Helping Soldiers and Families

SUCCEED

THE support and authority invested by leaders can define the success of intervention and treatment. Leaders should:

- ▣ Let soldiers know that the multidisciplinary team approach is tailored to promote individual, couple and family enrichment.
- ▣ Encourage soldiers and family members to cooperate and use recommended treatment.
- ▣ Permit a schedule that allows the soldier to attend recommended services.
- ▣ Maximize support by taking an active interest in how soldiers and their family members are progressing through the treatment phase.
- ▣ Notify the case manager or multidisciplinary team of changes in the soldier's unit activity.



Consequences:

Disciplinary and Administrative Action

FAMILY Advocacy Program intervention is meant to treat soldiers who recognize they have problems and are willing to work toward strengthening family bonds. If the soldier is charged with a misdemeanor or felony offense, leaders may have to take administrative or punitive action. However, since there are no data that suggest a punitive approach is the best strategy in eliminating family violence, the Army prefers to treat rather than punish. All leaders are urged to:

- Coordinate with legal experts and the military police before drawing the line between treatment and punishment.
- Consider the multidisciplinary team's report on whether further treatment is practical, especially if incidents have occurred repeatedly and if the command is working harder than the soldier and family.
- Consider the soldier's service record and retention potential.
- Consider whether the soldier fails to comply with command-directed treatment or administrative restrictions.
- Ensure that families receive information on financial and other benefits available if the soldier is separated from active duty through a court-martial or administrative action on the basis (at least in part) of a dependent-abuse offense.

RESOURCES

Army Regulation 608-18, “The Army Family Advocacy Program”—Establishes DA policy on the reporting, investigation, prevention and treatment of child and spouse abuse.

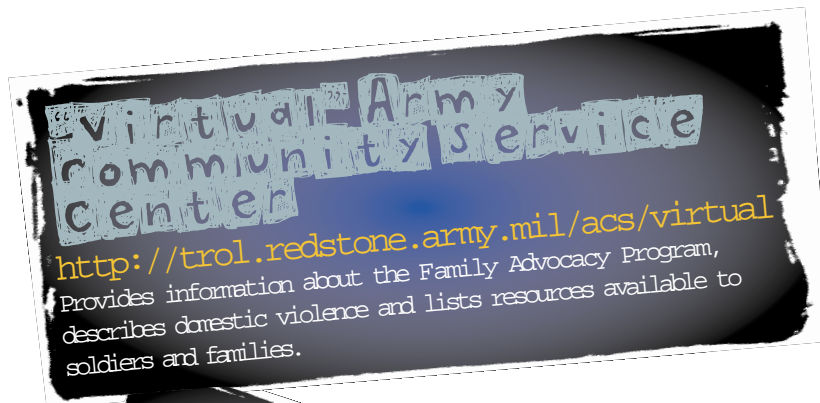
Family Advocacy Program—Army Community Service is responsible for the overall management of the FAP and coordination of services through the medical treatment facility, lawyers, law-enforcement personnel, chaplains, other installation staff, and civilian agencies such as child-protective services. Prevention and treatment services include support groups; workshops; counseling; classes in stress management, anger control and financial planning; respite and foster care; and a resource library. Located at installations and medical treatment facilities throughout the world.

Commander’s and NCO’s Desk Guide—

Provides an overview of the Family Advocacy Program and outlines leaders’ responsibilities in preventing family violence and how they can enhance the treatment process. Also gives tips on building trust and supporting family well-being.

Victim Advocacy Program—Victim advocates are employed by the Family Advocacy Program and are paired with victims. They can help commanders manage cases of violence and act as a liaison between the victim and the community. Victim advocates gain the confidence of the victim and lend a compassionate ear, as well as help them prepare for meetings, interviews or other interactions with authorities. Family members who are not victims but feel threatened may also call upon the victim advocate. This is a new program, currently being added to FAP offices worldwide. Call your local Army Community Service for details.

Transitional Compensation Program—Grants monthly transitional compensation benefits, medical and dental coverage, and access to the commissary and post exchange to victims of family violence whose spouses are separated from the Army for reasons of dependent abuse via court-marital or administrative action. Eligibility begins on the date a court marital is approved or administrative separation is initiated. Payments are approved for a minimum of 12 months, but cannot exceed 36 months. The current monthly rate is \$881 for spouses and \$222 for each eligible child. This safety net was established in 1994 in hopes of removing the victim’s fear of reprisal and of being left without resources after reporting abuse that may lead to the soldier’s loss of pay if separated from active duty.



HOT TOPICS

CURRENT ISSUES FOR ARMY LEADERS



Leaders Can Make a Difference

AS a leader, you have the opportunity to change every generation that follows by supporting and initiating changes in a soldier's or family's history now. By establishing trust, offering support, encouraging non-violence, and presenting the available problem-solving options, you can prevent a stressful situation from escalating into a crisis.

Remember these prevention guidelines:

- ◎ **Talk** openly about prevention strategies.
- ◎ **Encourage** soldiers to develop healthy family relations.
- ◎ **Listen** to what soldiers are saying and build trust.
- ◎ **Teach** soldiers to take responsibility for their actions.
- ◎ **Refer** soldiers to treatment programs at the first signs of stress.
- ◎ **Report** suspicions of child and spouse abuse immediately.
- ◎ **Enforce** safety plans.
- ◎ **Support** soldiers and families throughout treatment.

BOTTOM LINE

Everyone has the right to feel free from harm.